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Phone No.: 508-979-3534RE: Application No./Patent No.: 10/038,235
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PTO/SB/81 (09-03)

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM		Application Number		10/038,235	
		Filing Date		October 19, 2001	
		First Named Inventor		Scott A. Rice	
		Title		METAL WOOD GOLF CLUB HEAD	
		Art Unit		1764	
		Examiner Name		DUONG, THANH P	
		Attorney Docket Number		C01-02	

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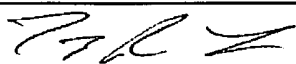
I am the:

☐ Applicant/inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name: Acushnet Company by Troy R. Lester, Assistant Secretary

Signature: 

Date: 6-24-04

Telephone: 508-979-3534

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Scott A. Rice

Application No./Patent No.: 10/038,235Filed/Issue Date: October 19, 2001Entitled: METAL WOOD GOLF CLUB HEADAcushnet Company, aCorporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or2. ☐ an assignee of less than the entire right, title and interest.The extent (by percentage) of its ownership interest is _____ %
in the patent application/patent identified above by virtue of either:A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012461, Frame 0802, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

6-24-04

Date

Troy R. Lester

Typed or printed name

508-979-3534

Telephone number



Signature

Assistant Secretary

Title

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